DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and soke inventor (if only one name is bisted below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patient is sought on the invention entitled: PRIVITED WINNER GAMPE.

the specification of which; (check one)			
X is attached hereto. was filed on	, as Application Serial No.	and was a	amended on
I hereby state that I have reviewed and amendment referred to above.	understand the contents of t	he above identified specifical	tion, including the claims, as amended by an
I acknowledge the duty to disclose inform Regulations, § 1.56.	nation which is material to the	patentability of this applicati	ion in accordance with Title 37, Code of Federa
			cation(s) for patent or inventor's certificate liste ing a filing date before that of the application o
Prior Foreign Application(s):			
Number: PCT/JP2004/009529	Country : PCT	Day/Month/Year: 05/JULY/	2004 Priority Claimed: YES
	cation is not disclosed in the p acknowledge the duty to disc	orior United States application lose material information as d	
Prior U.S. Applications: NONE			
Serial No. Fil	ing Date	Status	
I hereby declare that all statements made believed to be true; and further that these punishable by fine or imprisonment, or b jeopardize the validity of the application	statements were made with t ooth, under Section 1001 of Ti	he knowledge that willful fals	
As a named inventor, I hereby appoint the and Trademark Office connected therew	ne following attorneys and/or ith: All attorneys and/or agen	agents to prosecute this applicate at Customer No242	cation and transact all business in the Patent
Send all correspondence to: Custon	ner No24241		
Direct Telephone Calls to : ANTHONY (802) 769-870			
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